NEW HAMPSHIRE CHILD CARE SCHOLARSHIP BILLING INSTRUCTIONS FOR THE GOVENOR DECLARED STATE OF EMERGENCY EFFECTIVE MARCH 16, 2020

Regardless of whether the child is absent, present or your child care program is closed during the state of emergency, you are authorized to bill for all eligible children using the Disaster indicator "D." **PLEASE DO NOT USE ANY OTHER INDICATORS ("P", "A", "C" OR "T").** Disaster billing begins on 3/16/2020 and will continue until further notice. Please follow these directions until we notify you when the disaster designation is no longer activated.

School Age Children: The full time school age override has been activated effective 3/16/2020 when a parent is in a full time activity.

DHHS will pay the authorized service level for all eligible children during the Governor declared State of Emergency. You must input the exact DHHS protocol below on the web billing claim entry screen based on the authorized service level for each child. The authorized service level is indicated in the upper right hand corner of the claim entry screen.

1. If the child has a **Full** Time service level (you can find this on top of claim entry screen) please bill the following schedule: (This will allow you to receive full time payment)

Monday: 8:00 A.M. - 2:00 P.M. Tuesday: 8:00 A.M. - 2:00 P.M. Wednesday: 8:00 A.M. - 2:00 P.M. Thursday: 8:00 A.M. - 2:00 P.M. Friday: 8:00 A.M. - 3:00 P.M.

- You will indicate "D" for each day.
- Actual Charge Amount you **must** enter is \$255.00 (regardless of your actual charge)
- 2. If the child has a **Half** Time service level (you can find this on top of claim entry screen), please bill the following schedule: (this will allow you to receive half time payment)

Monday: 8:00 A.M. - 11:00 A.M. Tuesday: 8:00 A.M. - 11:00 A.M. Wednesday: 8:00 A.M. -11:00 A.M. Thursday: 8:00 A.M. - 11:00 A.M. Friday: 8:00 A.M. - 12:00 P.M.

You will indicate "D" for each day.

Thursday: 8:00 A.M. - 9:00 A.M.

- Actual Charge Amount you must enter is \$200.00 (regardless of your actual charge)
- 3. If the child has a **Part** Time service level (you can find this on top of claim entry screen), please bill the following schedule: (this will allow you to receive part time payment)

Monday: 8:00 A.M. – 9:00 A.M. Tuesday: 8:00 A.M. – 9:00 A.M. Wednesday: 8:00 A.M.-9:00 A.M

Friday: 8:00 A.M. - 9:00 A.M.

• You will indicate "D" for each day

Actual Charge Amount you must enter is \$100.00 (regardless of your actual charge)

DHHS will be waiving the policy regarding client signatures. Please just indicate on your attendance sheet, DISASTER in the signature line. As always, please make sure you are billing weekly. No paper billing invoices will be accepted for these weeks.

If you have any questions, please call Provider Relations at 603-271-4242 or email Sarah.Nelson@dhhs.nh.gov.

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Last Name : TAYLOR		First Name : KIT		Rid Number :		Created By : Sherry.D.Michael	Web Claim Id: 2837238
Link Begin: 11/01/2019		Link End :				Weekly Rate: \$0.00	Total Hours: 0
Claimed Amount: \$0.00		Calculated Amount: \$0.00		Cost Share Amount: \$8.12		ability Amount: \$0.00	Service Level: Full Time
Claim Entry - New							
	Occurs	Start Time	End Time	Billing Indicator	Hours- Minutes	NOTE	
Monday 03/16/2020	1	08 : 00 AM 🗸	02 : 00 PM 🗸	D - Disaster	6.00		
	2	: × V	* *	*			
	3	: * *	* 🔻	*			
Tuesday 03/17/2020	1	08 : 00 AM V	02 : 00 PM 🗸	D - Disaster	6.00		
	2	: * V	*	*			
	3	* 🔽	* 🔻	*			
Wednesday 03/18/2020	1	08 : 00 AM V	02 : 00 PM V	D - Disaster	6.00		
	2	* 🔻	* 🔻	*			
	3	* V	* *	*			
Thursday 03/19/2020	1	08 : 00 AM V	02 : 00 PM 🗸	*	6.00		
	2	* •	* *	A - Absent D - Disaster			
	٦			P - Present			